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Bib Data Sheet

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|-----------------------------|-----------------------------------|--------------|------------------------|--|
| SERIAL NUMBER 10/649,870 | FILING DATE 08/27/2003 RULE | CLASS 340 | GROUP ART UNIT 2632 | ATTORNEY DOCKET NO. H054165.0002US0 |
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APPLICANTS

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** CONTINUING DATA *****

Name .

Teff 10/25/04

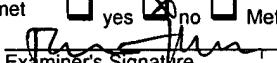
** FOREIGN APPLICATIONS *****

Name .

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 11/25/2003

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|---------------------------------|--|---------------------|---------------|--------------|-------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | TX | DRAWING 11 | CLAIMS 28 | CLAIMS 1 |
| Verified and Acknowledged |  Initials | | | | |

ADDRESS

01200
 AKIN, GUMP, STRAUSS, HAUER & FELD
 1111 LOUISIANA STREET
 44TH FLOOR
 HOUSTON , TX
 77002

TITLE

Alarm device interface system

| | | |
|-----------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
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